



The City of Hillsboro Police Department is recruiting for our Cadet program. These are non-compensated volunteer positions. The recruitment process is open August 1 thru September 15, 2017.

Applicants must: • be 15 to 20 years of age at time of application; • be a high school graduate or a student in high school or college and maintain a 2.5 GPA or higher; • possess or have the ability to immediately secure a valid driver's license or permit, and maintain a good driving record; •not have been convicted of any crime or violation classifiable as a Class A Misdemeanor or higher.

To Apply

1. Complete the City of Hillsboro Police Department Cadet Program application;
2. Answer the supplemental questionnaire;
3. At least one letter of recommendation;
4. A copy of your last grades/transcript (June 2017).

Application deadline is September 15, 2017, 4:30pm.

Application packets should be sent via mail or personal delivery. Please address applications to Cindy Naylor, Hillsboro Police Department, 250 SE 10th Ave., Hillsboro, OR 97123. **Applications received without/or incomplete supplemental responses, letter of recommendation and current grades will not be considered.** Resumes will not be accepted in lieu of the application forms; however, resumes may be submitted in addition to the application.

Selection Process

Applications will be evaluated based on experience, training, and skills presented in the application. Those applicants successfully passing the application rating phase will be scheduled for an panel interview. Applicants will be notified by telephone and/or email of the specific date and time. An extensive background investigation will be required of finalists. All finalists will be required to pass a drug screen. All applicants will be notified in writing of the final status of their application. Participation in the Cadet Program will be contingent upon presentation of acceptable documents verifying identity and employment eligibility in the United States.

Equal Employment Opportunity

The City of Hillsboro is an Equal Employment Opportunity employer. All qualified persons will be considered for employment without regard to race, color, and religion, sex, sexual orientation, national origin, age, and marital status, mental or physical disability. Applicants who feel their civil rights have been violated at any time during the course of their consideration for employment with the City of Hillsboro should contact the Human Resources Department immediately. Applicants who consider themselves disabled under federal or state law and desire assistance should contact the Human Resources Department.

Police Department

Mail 250 SE 10th Avenue, Hillsboro, Oregon 97123 Phone 503.681.6190 Fax 503.681.6260

Web www.ci.hillsboro.or.us/Police



Hillsboro Police Department

Cadet Program Information

PURPOSE

The Cadet Program is a civilian group whose purpose is to observe and assist members of this department. The Cadet Program allows young people who are interested in law enforcement careers an opportunity to observe the functions of a police department and learn about law enforcement by observing and assisting.

AUTHORITY

Cadets are commissioned Hillsboro Police Department volunteers, but have no police powers and are not police officers.

SUPERVISION

Cadets work under the direct supervision of the officer with whom they are riding. The Cadets follow the orders of that officer and assist the officer in any detail requested, keeping in mind safety, department work rules, and Cadet rules and regulations. Officers attempt to educate the Cadet in all aspects of police work. Cadets also work under the supervisor of the Cadet Advisors, Cadet Sergeant and Cadet Lieutenant Coordinators.

SAFETY

Officers carefully monitor the Cadet's safety. Should the officer feel that the situation is too dangerous for a Cadet; the officer may elect to have the Cadet remain with the patrol vehicle, or may re-assign the Cadet to a safe location. Cadets do not possess any weapon while performing duties as a Cadet, except during supervised training or authorized competitions.

RESPONSIBILITY

A specific police department member is designated as the Cadet Coordinator who administers the Cadet Program. Officers and other police department employees also serve as Cadet Program Advisors to handle coordination and supervision of Cadet activities and programs.

ELIGIBILITY STANDARDS

Applicants for the Cadet Program must meet the following criteria:

- Be 15 to 20 years of age at time of application.
- Be a high school graduate or a student at a high school or college and maintain a 2.5 GPA or higher.
- Possess or have the ability to immediately secure a valid driver's license or permit, and maintain a good driving record.
- Not have been convicted of any crime or violation classifiable as a Class A Misdemeanor or higher.
- Successfully complete an application form, interview, background check and drug screen.

UNIFORM

Each Cadet is provided a standard Hillsboro Police Department Cadet uniform, including shirts, slacks and equipment. All Cadets maintain their uniform items in a workable and presentable fashion and are required to wear their uniforms in the prescribed manner.

RULES AND REGULATIONS

Each Cadet adheres to all Rules and Conduct that Hillsboro Police Department officers adhere to, and likewise comply with pertinent policies.

CONTACT INFORMATION

Cadet Coordinators:

Sergeant Alex Oh 503-681-6496; alex.oh@hillsboro-oregon.gov

Lieutenant Henry Reimann 503-615-6789; henry.reimann@hillsboro-oregon.gov

Questions about application process:

Cindy Naylor 503-681-6140; cindy.naylor@hillsboro-oregon.gov

Hillsboro Police Department

Cadet Program Supplemental Questionnaire

Please prepare a word processed, typewritten or handwritten response for the following questions. Relevancy of your experience and training together with composition, grammar, spelling, punctuation, legibility, and neatness will be considered when evaluating responses. Responses should not exceed two (2) single-sided pages. **Your name must appear on each page.** **Please staple responses to the employment application.**

Incomplete applications or applications without complete supplemental responses will not be considered. Resumes will not substitute for responses to the supplemental questionnaire.

1. Describe a project that you have worked on recently (i.e., school assignment, hobby, club activity). Include details about the project: What type of research was required; was it a solo project, or were others involved? If so, what were their roles? Describe any obstacles or issues that occurred and how you addressed those problems.
2. As a Cadet, you will be asked to give a considerable amount of your free time to the Hillsboro Police Department. You may be called on to assist with security and traffic posts at numerous events and during inclement weather. Many of our Cadets must juggle school, jobs, family and a social life. How would you handle such a large commitment?
3. Why are you interested in the Hillsboro Police Cadet Program? If you do not attend school or live in Hillsboro, what made you decide to apply for a program outside of your city?

An Equal Opportunity Employer

We are dedicated to a policy of non-discrimination in employment on the basis of race, color, religion, sex, national origin, age, marital status, mental or physical disability



HILLSBORO POLICE CADET APPLICATION

You must include complete addresses, zip codes and phone numbers (with area codes). Type or print legibly. If an item/question does not apply, enter "DNA".

NAME: _____
LAST FIRST MIDDLE

ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: (____) _____ WORK PHONE: (____) _____

CELL PHONE: (____) _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____ STATE _____

CURRENT SCHOOL if applicable: _____

COMMUNITY ORGANIZATION (CURRENT OR PAST MEMBER, LIST TIME AND POSITION HELD)

LIST ANY SPECIAL TRAINING, LICENSES, CERTIFICATES, LANGUAGES OR OTHER SKILLS YOU MAY HAVE THAT ARE PERTINENT TO THE POSITION TO WHICH YOU ARE APPLYING:

If space provided is inadequate, add another page and identify additional information by section.

WORK INFORMATION: If not applicable, write DNA

NAME OF EMPLOYER: _____

ADDRESS: _____

SUPERVISOR: _____ PHONE: _____

DATE OF EMPLOYMENT: _____

YOUR PRIMARY DUTIES: _____

MAY WE CONTACT YOUR EMPLOYER? _____ IF NO, WHY: _____

IN THE SPACE BELOW, LIST ALL JOBS YOU HAVE HELD IN THE PAST.

NAME OF EMPLOYER: _____

ADDRESS: _____

SUPERVISOR: _____ PHONE: _____

BEGINNING DATE: _____ ENDING DATE: _____

YOUR PRIMARY DUTIES: _____

REASONS FOR LEAVING: _____

NAME OF EMPLOYER: _____

ADDRESS: _____

SUPERVISOR: _____ PHONE: _____

BEGINNING DATE: _____ ENDING DATE: _____

YOUR PRIMARY DUTIES: _____

REASONS FOR LEAVING: _____

NAME OF EMPLOYER: _____

ADDRESS: _____

SUPERVISOR: _____ PHONE: _____

BEGINNING DATE: _____ ENDING DATE: _____

YOUR PRIMARY DUTIES: _____

REASONS FOR LEAVING: _____

EDUCATION/SCHOOL INFORMATION

HIGH SCHOOL GRADUATE? YES _____, if so Year Graduated: _____ **NO** _____

HIGH SCHOOL: _____

ADDRESS: _____

PHONE NUMBER: _____

G.E.D.? YES NO _____ YEAR COMPLETED: _____

WHERE FROM: _____

PHONE NUMBER: _____

ATTENDING HIGH SCHOOL? YES NO

HIGH SCHOOL: _____

ADDRESS: _____

PHONE NUMBER: _____

WHAT GRADE: _____ YEAR TO GRADUATE: _____

GPA: _____ (attach copy of current grades to application)

ATTENDING COLLEGE? YES NO

COLLEGE: _____

ADDRESS: _____

PHONE NUMBER: _____

MAJOR: _____

GPA: _____ (attach copy of current grades to application)

ATTENDANCE AT MORE THAN ONE HIGH SCHOOL?

HIGH SCHOOL: _____

ADDRESS: _____

PHONE NUMBER: _____

YEARS ATTENDED: _____

REASON FOR CHANGING SCHOOLS: _____

REFERENCES

(List at least four local persons over 21 years of age, who have known you for at least 18 months that are **not related to you.**) **In addition, submit at least one letter of recommendation from a school or community based leader.**

NAME: _____ TIME KNOWN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ Email Address: _____

HOME PHONE: (____) _____ WORK/CELL PHONE: (____) _____

HOW DO YOU KNOW THIS PERSON? _____

NAME: _____ TIME KNOWN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ Email Address: _____

HOME PHONE: (____) _____ WORK/CELL PHONE: (____) _____

HOW DO YOU KNOW THIS PERSON? _____

NAME: _____ TIME KNOWN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ Email Address: _____

HOME PHONE: (____) _____ WORK/CELL PHONE: (____) _____

HOW DO YOU KNOW THIS PERSON? _____

NAME: _____ TIME KNOWN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ Email Address: _____

HOME PHONE: (____) _____ WORK/CELL PHONE: (____) _____

HOW DO YOU KNOW THIS PERSON? _____

NAME: _____ TIME KNOWN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ Email Address: _____

HOME PHONE: (____) _____ WORK/CELL PHONE: (____) _____

HOW DO YOU KNOW THIS PERSON? _____

NAME: _____ TIME KNOWN: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ Email Address: _____

HOME PHONE: (____) _____ WORK/CELL PHONE: (____) _____

HOW DO YOU KNOW THIS PERSON? _____

CERTIFICATE OF APPLICANT

I hereby certify that this application contains no misrepresentations or falsifications and that the information given is true and complete to the best of my knowledge and belief. I understand that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and/or dismissal from the Cadet Program. I authorize this agency, the City of Hillsboro Police Department, to make any necessary and appropriate investigations to verify the information contained herein, and I authorize previous and present employers and references to release information as necessary to verify any qualifications for participation in the Cadet Program.

Date_____ Signature of Applicant_____

PARENT/GUARDIAN APPROVAL

In the event that the applicant is less than 18 years of age, this release must be signed by both parents or guardians (as applicable.)

As the parent or legal guardian of the listed juvenile in this application, I have read and understand the general release and waiver of liability, and I do consent to the participation of my son/daughter in the cadet program.

PARENT/STEP-PARENT/GUARDIAN Date_____

PARENT/STEP-PARENT/GUARDIAN Date_____

APROBACION de CRIA/GUARDIAN

En el evento que el aplicante sea menos de 18 años de edad, esta liberación debe ser firmada por ambos padres o guardianes (cuando aplicable.)

Como el padre o guardián legal del listó juvenil en esta aplicación, yo he leído y he entendido la liberación y renuncia generales de la responsabilidad. Como padre o guardián yo consiento la participación de mi hijo/hija en el programa de cadete.

PADRE/PADRASTRO/GUARDIAN Fecha_____

PADRE/PADRASTRO/GUARDIAN Fecha_____